



Dominion Road
School
He Maunga Teitei

Application for Student leave during term time

Students Name: _____

Today's Date: _____

Leave requested from 1st Date: _____ to last date: _____

Date Returning to school: _____

Purpose of leave: _____

Person requesting the leave from school: _____

Parent's signature: _____

Contact Ph: _____

Email: _____

For office use

To be signed by Principal

This leave determined as: _____

Principal's signature: _____

DATE: _____